STATE OF MAINE

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Tel: (207)287-6221 FAX: (207)287-6775 Website: /www.maine.gov/ethics

REPORTS OF CONTRIBUTIONS AND EXPENDITURES BY PERSONS OTHER THAN POLITICAL ACTION COMMITTEES (21-A M.R.S.A. § 1056-B)

Any person who solicits and receives contributions or makes expenditures, other than by contribution to a political action committee, aggregating in excess of \$1,500 for the purpose of initiating, promoting, defeating or influencing in any way a ballot question must file a report with the Commission.

NAME OF PERSON (Person means an individu	al, committee, firm, partnership,	corporation, association, group or organization.)
Nailing address		
City, zip code		
Celephone number	Fax	E-mail
AME OF TREASURER(or other officer or emplo	oyee authorized to file this report	if person reporting is other than an individual)
Mailing address		
City, zip code		
Γelephone number	Fax	E-mail
The purpose for receiving contri	butions and making expenditu	
The purpose for receiving contri	butions and making expenditu ballot question number (res is (check one): if known) or the ballot question regarding
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Date

Person's/Authorized Official's signature

CGEEP Form 1056-B (Rev. 5/06)

	Page of	
Name of PERSON	(Schedule A or	ıly)

SCHEDULE A CASH CONTRIBUTIONS

Include cash contributions only. Itemize contributions aggregating in excess of \$100 in this election from the same source.

Do not include in-kind contributions or loans on this schedule.

DATE RECEIVED	Contributor's name, mailing address, zip code (Contributions in excess of \$100)	Amount
	1. Total cash contributions this page only	
	Complete lines 2-4 on last page of Schedule A only: 2. Total from attached Schedule A pages	
	3. Aggregate of cash contributions of \$100 or less not itemized	
	4. Total cash contributions this reporting period (Add lines 1, 2 & 3)	

Name of PER		age of (Schedule B only)		
SCHEDULE B EXPENDITURES Enter expenditures made aggregating in excess of \$100 in this election. Do not include in-kind expenditures on this schedule.				
Date of Expenditure	Name of Payee or Creditor and Purpose of Expenditure	Amount		
	1. Total cash contributions this page only			
	Complete lines 2-4 on last page of Schedule A only: 2. Total from attached Schedule A pages			
	3 Aggregate of cash contributions of \$100 or less not itemized			

4. Total cash contributions this reporting period (Add lines 1, 2 & 3)

Name of PER	SON	rage	(Schedule C only)				
SCHEDULE C							
IN-KIND CONTRIBUTIONS/EXPENDITURES							
With respect to <u>all</u> items and services received and expended, enter the date received/expended, a description of the item or service, and the fair market value. Enter contributor/payee or creditor only. If the fair market value of donated item or service is <u>more</u> than \$100.							
Date of Contribution or Expenditure	Name of Contributor/Payee or Creditor	Description of goods, services, discounts or facilities received/expended	Fair market value				
1. Total in-kind contributions/expenditures this page only							
Compete lines 2-3 on last page of Schedule C: 2. Total from attached Schedule C pages							

Total in-kind contributions received and expended this reporting

3.

period

(Add lines 1 & 2)